



TEXAS BOARD OF HEALTH
APPLICATION FOR ADVISORY COMMITTEE APPOINTMENT

Name of Committee/Board Code Enforcement Officers' Advisory Committee Initial appointment ☐ Reappointment ☐

Position Applied for Structural Engineer
(Choose from the list of positions in the Board of Health rules relating to this committee/board.)

Please complete this application in a brief, yet informative manner. If questions are not applicable, enter "NA". Your eligibility will be determined from the information you submit in this application. No resumes will be considered.

1. Name: _____
First Middle Last

2. Race/Ethnicity: ☐ White ☐ Black ☐ Hispanic ☐ American Indian/Alaskan ☐ Asian/Pacific Islander ☐ Other: _____

3. Gender: ☐ Male ☐ Female

4. Education: _____

5. Professional License, Registration or Certification, if applicable: _____

6. Relevant Experience (paid employment or volunteer): _____

7. Why do you wish to serve in this capacity? _____

8. Personal and professional achievements (include activities which address contributions you could make to the committee or board):

9. Have you ever been disciplined by any licensing board/professional or civic organization? ☐ Yes ☐ No If yes, please explain:

10. Have you ever been convicted of a felony or a misdemeanor (excluding traffic violations)? ☐ Yes ☐ No If yes, please explain:

11. Home Address

12. Employment Address

Street or P.O. Box *Apartment #*

Name of Employer

City *State* *Zip*

Street or P.O. Box *Suite #*

Area Code/Home Telephone *Facsimile Number*

City *State* *Zip*

Home email

Area Code/Business Telephone *Facsimile Number*

13. Please indicate where you would like to receive
future communications:

Current Position Title

_____ Home _____ Employment

Work email

**14. TWO LETTERS OF RECOMMENDATION FROM PROFESSIONAL AND/OR CIVIC ORGANIZATIONS
MUST BE ATTACHED.**

I ATTEST THAT ALL INFORMATION CONTAINED IN THIS DOCUMENT IS TRUE AND CORRECT.

Signature of Nominee

Date

PLEASE RETURN THIS FORM TO:

Yvonne Feinleib
Code Enforcement Officers Registration Program
Professional Licensing and Certification Division
Texas Department of Health
1100 West 49th Street
Austin, Texas 78756-3199